

July 2010

**Implications of United States Preventive Services  
Task Force A and B Recommendations Relevant to :**

**HB09-1204 and Patient Protection and  
Affordable Care Act Implementation Survey**



Colorado Department  
of Public Health  
and Environment

## HB09 1204 and Patient Protection and Affordable Care Act Implementation

### Instructions

In an effort to identify areas of inconsistency in the implementation of the United States Prevention Services Task Force (USPSTF) A and B recommendations, we are asking representatives of Colorado's major health plans to complete the attached survey. Given the comprehensiveness of the survey, it is highly recommended that the appropriate health plan subject matter expert(s) meet with staff from the Colorado Department of Public Health and Environment to complete the survey. Department staff will be contacting your subject matter expert(s) within the next week to schedule an appointment. We anticipate needing approximately 2 hours to collect the survey information. To expedite the process, please feel free to draft your responses prior to the meeting. For additional information, please contact Deb Osborne at [Deb.Osborne@state.co.us](mailto:Deb.Osborne@state.co.us) /303-692-2509. We appreciate your time and expertise in helping us acquire this information.

Health Plan:

Name of Person Responding:

Title:

Address:

Phone:

E-mail:

### Background

- How many total members does your Plan serve in Colorado?
- How many members are fully insured and thus subject to HB09-1204 and attendant insurance regulation 4-6-5 (1204)?
- Did the Plan implement 1204 for all insured lives effective 1-1-2010 or is it implementing as groups renew their coverage?

### Communication Strategies

- Has the Plan communicated to members the benefit changes made because of 1204? If yes, can you provide (attach) a copy of that communication?
- Has the Plan communicated to providers regarding payment changes made because of 1204? If yes, can you provide (attach) a copy of that communication?

### Partnership Plan

- To meet the tobacco cessation requirements of HB 1204, has the Plan joined the Partnership Plan to support Quitline enrollment for its members?  Yes  No
- Has the Plan made additional tobacco cessation *counseling* services available to its members beyond that provided by the QuitLine as part of the Partnership Plan?  Yes  No
- Has the Plan made additional tobacco cessation *pharmacotherapy* options available to its members beyond the 4 weeks of NRT provided by the QuitLine as part of the Partnership Plan?  Yes  No

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### Member Benefits

- For the following preventive health services mentioned in 1204 and/or Patient Protection and Affordable Care Act (PPACA), please reply “yes” or “no” in each cell for all of your fully insured members (group and individual policies). (Note: this is not a comprehensive list of USPSTF A & B recommendations):

Service	Covered Benefit	Subject to Deductible	Subject to Coinsurance	Annual Limits	Lifetime Limits	Quantity Limits	Age Limits	Risk-based Limits
<b>Alcohol Screening</b>								
Alcohol misuse screening and brief interventions by PCPs								
<b>Cancer Screening</b>								
Cervical cancer screening								
Breast cancer screening with mammography (as amended by HB 1252)								
Colorectal cancer screening								
<b>Immunizations and Vaccines</b>								
Diphtheria, Tetanus, Pertussis								
Haemophilus influenza Type B								
Hepatitis A								
Hepatitis B								
Human Papillomavirus								
Inactivated Poliovirus								
Influenza vaccinations								
Measles, Mumps, Rubella								
Meningococcal								
Pneumococcal vaccinations								
Rotavirus								
Varicella								
Zoster (Shingles)								

**Member Benefits Continued**

- For the following preventive health services mentioned in 1204 and/or Patient Protection and Affordable Care Act (PPACA), please reply "yes" or "no" in each cell for all of your fully insured members (group and individual policies). (Note: this is not a comprehensive list of USPSTF A & B recommendations):

Service	Covered Benefit	Subject to Deductible	Subject to Coinsurance	Annual Limits	Lifetime Limits	Quantity Limits	Age Limits	Risk-based Limits
<b>Tobacco Screening &amp; Cessation</b>								
Tobacco use screenings of adults								
Tobacco cessation interventions								
Varenicline								
Bupropion SR								
<b>Obesity</b>								
Screening of all adults for obesity								
Intensive counseling and behavioral interventions to adults promote sustained weight loss								
Screening of children 6 years and older for obesity and								
Offer or refer children to comprehensive, intensive behavioral interventions								
<b>Other</b>								
Screen for cholesterol levels and lipid profile								

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- For any service that is not covered or has limited coverage, please explain if or how the USPSTF guidelines factored into the coverage decision. Please use a supplemental page if necessary.
- Please confirm whether Plan provides coverage for over the counter (OTC) nicotine replacement therapy (NRT) tobacco cessation products. Please answer yes/no

<b>Over the Counter Coverage</b>	<b>All Fully Insured</b>	<b>Fully Insured as a Buy-Up</b>	<b>All Individual</b>	<b>Individual as a Buy-Up</b>
Coverage for OTC NRT products				
Prescription is required for OTC				
Member cost sharing is required				

- How does the Plan determine if a colorectal cancer (CRC) screening procedure is preventive versus diagnostic?

<b>CRC Clarification</b>	<b>Check if preventive or diagnostic</b>	<b>If diagnostic, explain your Plan's criteria:</b>
If a screening colonoscopy finds an adenoma, is it considered preventive or diagnostic?	___ Preventive ___ Diagnostic	
If adenoma is benign, is next screening preventive or diagnostic?	___ Preventive ___ Diagnostic	
If FOBT results indicate further screening, is secondary screening considered preventive or diagnostic?	___ Preventive ___ Diagnostic	
If secondary screening is negative, is it considered preventive or diagnostic?	___ Preventive ___ Diagnostic	

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### Provider Support

- Do you reimburse providers for Alcohol misuse screening and brief intervention (Screening, Brief Intervention and Referral to Treatment – SBIRT); Tobacco use screenings of adults and tobacco cessation interventions; and obesity screening and counseling? Please reply “yes” or “no” in each cell for all of your fully insured members (group and individual policies).

	CPT 99406 (Tobacco)	CPT 99407 (Tobacco)	Other tobacco codes (list)	CPT 99408 (SBIRT)	CPT 99409 (SBIRT)	Other SBIRT codes (list)	Obesity screening codes (list)	Obesity counseling codes (list)
Provider Reimbursement								

- H.B. 1204 and the Patient Protection and Affordable Care Act (PPACA) require preventive health services to be provided in accordance with the A or B recommendations of the USPSTF. However, many of the items with A or B evidence cannot be translated into covered benefits per se but are items a Plan might incorporate into how it works with its physicians. For each item listed below, please explain if and how the Health Plan provides for the interventions.

Non-benefit Recommendation	Plan has incorporated (Yes/No)	If yes, brief description (e.g. built into contract, chart audit)
1. All patients are asked if they use tobacco and have their tobacco use documented on a regular basis		
2. Every tobacco user is offered a minimal intervention lasting less than 3 minutes, whether or not he or she is referred to an intensive intervention		
3. Provide referral to proactive tobacco cessation telephone counseling, group counseling or individual counseling formats		
4. Provide tailored tobacco cessation materials (print and web-based self-help content)		Note : Cessation materials are available free of charge for distribution by health plans and providers at <a href="http://www.cohealthresources.org">www.cohealthresources.org</a> or for web-base cessation programs, visit <a href="http://www.myquitpath.org">www.myquitpath.org</a>

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Non-benefit Recommendation	Plan has incorporated (Yes/No)	If yes, brief description (e.g. built into contract, chart audit)
5. Offer certain combinations of first-line cessation medications shown to be effective		
6. Promote and support breastfeeding during pregnancy and after birth		
7. Adults screened for depression when staff-assisted depression care supports are in place to assure accurate diagnosis, effective treatment and follow-up		

- Please share any other issues that have arisen as the Plan has implemented H.B. 1204, particularly those that could be rectified with further clarification:

**Release of Plan Identity**

Please sign if Plan is not willing for its name to be released in association with specific results of this survey: \_\_\_\_\_

**Affirmation**

To the best of my knowledge, this information is true and accurate for majority of fully insured Colorado members.

\_\_\_\_\_  
Signature of Chief Executive Officer